



**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF OHIO**

In re:) **Judge Russ Kendig**
)
PAUL RAY DENT, JR.) **Case No. 13-60813**
)
)
 Debtor(s).) ☒ **Chapter 13 Form Plan Summary**
) ☐ **Amended Chapter 13 Plan**

Read this carefully. You are a party in interest in this bankruptcy case. This is a summary based upon a form plan adopted in this court. The full length form controls over the terms of this summary. Special Provisions (paragraph 1) are deviations from the form and should be read with special care. You may review the form plan at www.ohnb.uscourts.gov. The letters and numbers in parentheses in this plan summary are the paragraphs of the Form Plan into which the data would be inserted.

1. SPECIAL PROVISIONS:

- A. Plan shall extend for a period of sixty (60) months.
- B. Monthly payments of \$1,000.00 via payroll deduction.
- C. The three (3) vehicle loans shall be paid through the Plan all at 5.25% A.P.R.
- D. The mortgage is current and shall be paid outside the Plan.

☐ Continued on attached separate page(s).

2. N/A % or a pot of \$ 49,000.00 to general unsecured creditors (E9)

3. Assumed unexpired leases and executory contracts (B2)

<u>Creditor</u>	<u>Description of asset or contract</u>
<u>None.</u>	

☐ Continued on attached separate page(s).

All other leases and executory contracts deemed rejected.

4. Mortgages or Judgment Liens - Ongoing Monthly Payment (C, E3, E6)

<u>Creditor</u>	<u>Priority</u>	<u>Property Address</u>	<u>Proposed Pymt/Mo.</u>	<u>To be paid by debtor, trustee, or stripped & not secured</u>
<u>Home Savings & Loan</u>	<u>1st</u>	<u>13285 Beeson St NE</u>	<u>\$ 774.17</u>	<u>DEBTOR</u>
	<u>2nd</u>			
	<u>3rd</u>			

☐ Continued on attached separate page(s).

5. Mortgage Arrears (E4)

<u>Creditor</u>	<u>Estimated Amount</u>	<u>Rate (%)</u>
None.		%
		%
		%

☐ Continued on attached separate page(s).

Creditors who do not agree to rate of interest must object to confirmation or the rate in this paragraph is deemed to be absolute on confirmation. The amount of arrearage is subject to contrary proof of claim.

6. Secured Non-mortgage claims to be paid full current balance (E5)

Creditor:			
Collateral:			
Date Incurred:			
Monthly Payment:			
Interest Rate:	%	%	%
Estimated Balance:			
Paid By:			

☐ Continued on attached separate page(s).

7. Liens to be crammed down but not stripped (E7)

Creditor:	<u>Harley-Davidson Corp.</u>	<u>Capital One Serv.</u>	<u>Buckeye State C.U.</u>
Date Incurred:	<u>2009</u>	<u>2006</u>	<u>2010</u>
Collateral:	<u>2009 H-D Sportster</u>	<u>2006 Suzuki, Eiger 400</u>	<u>2002 Chevrolet S-10</u>
Monthly Payment:	<u>\$ 142.00</u>	<u>\$ 107.00</u>	<u>\$ 167.38</u>
Interest Rate:	<u>5.25</u> %	<u>5.25</u> %	<u>5.25</u> %
Secured Value:	<u>\$ 3,120.00</u>	<u>\$ 5,400.00</u>	<u>\$ 7,000.00</u>

☐ Continued on attached separate page(s).

Creditors who do not agree to date incurred, collateral description, monthly payment, interest rate or secured value must object to confirmation or the treatment in this paragraph is deemed to be absolute upon confirmation, except statutory tax liens, which will be paid as allowed.

8. Priority Claims to be paid in full and estimated as follows (E8)

<u>Creditor</u>	<u>Source & Year</u>	<u>Amount</u>
None.		

☐ Continued on attached separate page(s).

9. The holder(s) of any claim for Domestic Support Obligations pursuant to 11 U.S.C. § 1302(d) shall be paid by the debtor unless specified in Special Provisions. The holder of the Domestic Support Obligation is specified below. If the holder of a claim is a minor, the name and address of such minor has been disclosed to the Trustee contemporaneously with the filing of this plan in compliance with 11 U.S.C. § 112. (B6)

Holder Name: _____
Holder's Address (if known): _____
Address of Child Support _____
Enforcement Agency (mandatory): _____

☐ Continued on attached separate page(s).

10. Payments to Trustee (D)

The debtor will pay to the trustee \$ 1,000.00 monthly for a minimum of 36 months, or all future disposable income, whichever is greater. Payments shall be by ☒ Wage Order on employer ☐ by Debtor ("Private Pay") in the form of money order or certified check.

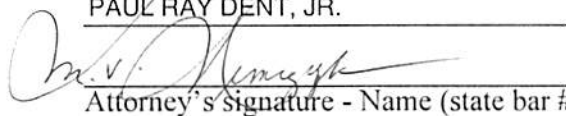
11. Attorneys Fees are pursuant to the current Administrative Order. Any deviation is in Special Provisions. (E2)



Debtor's signature - name typed below

Debtor's signature - name typed below

PAUL RAY DENT, JR.



Attorney's signature - Name (state bar #), address and phone typed below

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